

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Examiner Docket No.	2000-0414	Total Pages	38
	First Named Inventor or Application Identifier			
	Frederick Murray Burg			
	Express Mail Label No.	EL809217355US		

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 24] <small>(preferred arrangement set forth below)</small> - Descriptive title of invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings(if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 4] 4. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application(37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <small>[Note Box 5 below]</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s)          named in the prior application, see 37 CFR          1.63(d)(2) and 1.33(b)</small> 5. <input type="checkbox"/> Incorporation by reference(usable if Box 4b is checked) <small>The entire disclosure of the prior application, from which a copy of the oath          or declaration is supplied under Box 4b, is considered as being part of the          disclosure of the accompanying application and is hereby incorporated by          reference herein.</small>	6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy(identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies  <b>ACCOMPANYING APPLICATION PARTS</b> 8. <input checked="" type="checkbox"/> Assignment Papers(cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b)Statement <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS <small>Statement(IDS)/PTO-1449 Citations</small> 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, <small>Statement(s) Status still proper and desired</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input checked="" type="checkbox"/> Other: Non-Publication Request

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior Application No:

### 18. CORRESPONDENCE ADDRESS

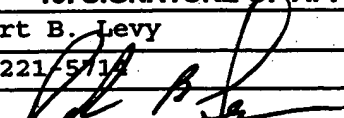
☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

 or ☒ Correspondence address below

NAME	Samuel H. Dworesky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

### 19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Robert B. Levy	Reg. #	28234
TELEPHONE	908-221-5714		
SIGNATURE			
DATE	October 25, 2001		

"Express Mail" Mailing Label Number EL809217355US

Date of Deposit 10/25/2001

I hereby certify that this application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington D.C., 20231

Ann E. Taylor

(Printed Name of Person Mailing Paper)

  
 (Signature of Person Mailing Paper)

Copy of Previously Filed application papers  
 & forms from OPLA.

**FEE TRANSMITTAL**

Patent Fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997

Small Entity payments must be supported by a small entity Statement, otherwise, large entity fees must be paid. See Forms PTO/SB/09-12.

Complete if *m*

Application Number

Filing Date

First Named Inventor

Frederick Murray Burg

Examiner Name

Group/Art Unit

Attorney Docket No.

2000-0414

TOTAL AMOUNT  
OF PAYMENT

\$1562.00

**METHOD OF PAYMENT (check one)**

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745  
Deposit Account Name AT&T CORP.☒ Charge Any Additional Fee Required Under 37 CFR 1.18 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance2. ☐ Payment Enclosed☐ Check ☐ Money Order ☐ Other**FEE CALCULATION****1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
101	740	Utility Filing Fee	\$740.00
106	330	Design Filing Fee	
107	510	Plant Filing Fee	
108	740	Reissue Filing Fee	
114	160	Provisional Filing Fee	

SUBTOTAL (1) \$740.00

**2. CLAIMS** ☐ New Filing ☐ Amendment

Total	Ind.	Extra Claims	Fee from below	Fee Paid
47	20	27	18	\$486.00
7	3	4	84	\$336.00
Multiple Dependent Claims		0		\$0.00

Large Fee Code	Entity Fee(\$)	Fee Description
103	18	Claims in excess of 20
102	84	Independent Claims in excess of 3
104	280	Multiple Dependent Claims
109	84	Reissue independent claims over original patent
110	18	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$822.00

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2520	For filing a request for reexamination	
112	920*	Requesting publication of SIR prior to Examiner action	
113	1840*	Requesting publication of SIR after to Examiner action	
115	110	Extension for reply within first month	
116	400	Extension for reply within second month	
117	920	Extension for reply within third month	
118	1440	Extension for reply within fourth month	
128	1960	Extension for reply within fifth month	
119	320	Notice of Appeal	
120	320	Filing a brief in support of an appeal	
121	280	Request for oral hearing	
138	1510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1280	Petition to revive - unintentional	
142	1280	Utility issue fee (or reissue)	
143	480	Design issue fee	
144	580	Plant issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Statement	
581	40	Recording each patent assignment per property (times number of properties)	
146	740	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify)

Other fee (specify)

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

**SUBMITTED BY**

Typed or Printed Name Robert B. Levy

Signature

Date

10/25/2001

Deposit Account User ID

**Complete (if applicable)**

Reg. Number 28234

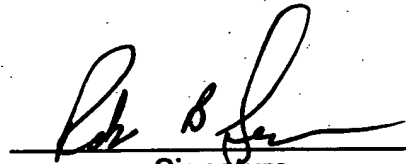
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>REQUEST AND CERTIFICATION UNDER 35 U.S.C. 122(b)(2)(B)(i)</b>	First Named Inventor	Frederick Murray Burg
	Title	Network-Based Method For Notification Of The Best Time To Call
	Atty Docket Number	2000-0414

I hereby certify that the invention disclosed in the attached application **has not and will not** be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

October 25, 2001

Date

  
Signature

Robert B. Levy, Attorney  
Reg. No. 28234

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this non-publication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

SEND TO: Commissioner for Patents, Washington, D.C. 20231.

Attorney's Initials: *RBL*  
 COMMISSIONER FOR PATENTS, BOX *APPLICATION*

Docket No. *2000-0414*  
 Applicant *BURG*

☒ Express Mail No *EL809217355US*  
☐ Certificate of Mailing

Application No.  
 Filing Date

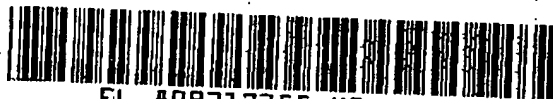
- |   |                                 |   |
|---|---------------------------------|---|
| <input checked="" type="checkbox"/> Specification                 | # of Pages <i>16</i>            | <input type="checkbox"/> Assoc./Power of Attorney                           |
| <input checked="" type="checkbox"/> Claims                        | # of Pages <i>7</i>             | <input checked="" type="checkbox"/> Assignment                              |
| <input checked="" type="checkbox"/> Abstract                      | # of Pages <i>1</i>             | <input checked="" type="checkbox"/> Recordation Form Cover Sheet            |
| <input checked="" type="checkbox"/> Drawings                      | # of Sheets <i>4</i>            | <input checked="" type="checkbox"/> IDS (Information Disclosure Statement)  |
| <input type="checkbox"/> Response to O.A. (Type)                  | <input type="checkbox"/> Formal | <input checked="" type="checkbox"/> Oath and Declaration                    |
| <input type="checkbox"/> Response to Notice to File Missing Parts |                                 | <input checked="" type="checkbox"/> PTO 1449 Form with <i>22</i> references |
| <input type="checkbox"/> Amendment                                |                                 | <input type="checkbox"/> Preliminary Amendment                              |
| <input type="checkbox"/> Notice of Appeal                         |                                 | <input checked="" type="checkbox"/> Transmittal Letter                      |
| <input type="checkbox"/> Appeal Brief                             |                                 | <input checked="" type="checkbox"/> Fee Transmittal Form                    |
| <input checked="" type="checkbox"/> Other                         |                                 | <input type="checkbox"/> Issue Fee Transmittal                              |
| <input type="checkbox"/> PCT Request Form                         |                                 | <input type="checkbox"/> Letter to Official Draftsman                       |
| <input type="checkbox"/> PCT Demand Form                          |                                 | <input type="checkbox"/> Extension of Time                                  |
| <input type="checkbox"/> PCT Invitation to Correct                |                                 |   |

PT 22 Papers mailed to Commissioner of Patents and Trademarks



UNITED STATES POSTAL SERVICE®

POST OFFICE  
 TO ADDRESSEE



EL 809217355 US

ORIGIN (POSTAL USE ONLY)

PO ZIP Code <i>07748</i>	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>
Date In <i>10-25-01</i>	Postage \$ <i>24.85</i>	
Time In <i>11:00</i>	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee
Weight <i>4</i> lbs. <i>1.8</i> ozs.	Int'l Alpha Country Code	COD Fee Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials <i>JJ</i>	Total Postage & Fees \$ <i>24.85</i>

SEE REVERSE SIDE FOR  
 SERVICE GUARANTEE AND LIMITS  
 ON INSURANCE COVERAGE

☐ WAIVER OF SIGNATURE (Domestic Only: Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

NO DELIVERY ☐ Weekend ☐ Holiday Customer Signature

CUSTOMER USE ONLY

METHOD OF PAYMENT

Express Mail Corporate Acct. No.

*X077291*

Federal Agency Acct. No. or  
 Postal Service Acct. No.

FROM: (PLEASE PRINT)

AT3T CORP  
 PO BOX 4110  
 MIDDLETOWN

PHONE

*NJ 07748-4110*

2000-0414 (Burg) RBL/aet

TO: (PLEASE PRINT)

Box: Patent Application  
 Commissioner for Patents  
 & Trademarks  
 Washington, D.C. 20231

FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com



Customer Copy  
 Label 11-F August 2000

Attorney's Initials: *ROL*

COMMISSIONER FOR PATENTS, BOX *APPLICATION*

Docket No. *2000-0414*

Applicant: *BURG*

☒ Express Mail No. *EL807217355US*  
☐ Certificate of Mailing

Application No.  
Filing Date

- |   |                      |                                 |
|---|----------------------|---------------------------------|
| <input checked="" type="checkbox"/> Specification                 | # of Pages <i>16</i> | <input type="checkbox"/> Formal |
| <input checked="" type="checkbox"/> Claims                        | # of Pages <i>7</i>  |                                 |
| <input checked="" type="checkbox"/> Abstract                      | # of Pages <i>1</i>  |                                 |
| <input checked="" type="checkbox"/> Drawings                      | # of Sheets <i>4</i> |                                 |
| <input type="checkbox"/> Response to O.A. (Type)                  |                      |                                 |
| <input type="checkbox"/> Response to Notice to File Missing Parts |                      |                                 |
| <input type="checkbox"/> Amendment                                |                      |                                 |
| <input type="checkbox"/> Notice of Appeal                         |                      |                                 |
| <input type="checkbox"/> Appeal Brief                             |                      |                                 |
| <input checked="" type="checkbox"/> Other                         |                      |                                 |
| <br>  |                      |                                 |
| <input type="checkbox"/> PCT Request Form                         |                      |                                 |
| <input type="checkbox"/> PCT Demand Form                          |                      |                                 |
| <input type="checkbox"/> PCT Invitation to Correct                |                      |                                 |
- |   |  |
|---|--|
| <input type="checkbox"/> Assoc./Power of Attorney                           |  |
| <input checked="" type="checkbox"/> Assignment                              |  |
| <input checked="" type="checkbox"/> Recordation Form Cover Sheet            |  |
| <input checked="" type="checkbox"/> IDS (Information Disclosure Statement)  |  |
| <input checked="" type="checkbox"/> Oath and Declaration                    |  |
| <input checked="" type="checkbox"/> PTO 1449 Form with <i>22</i> references |  |
| <input type="checkbox"/> Preliminary Amendment                              |  |
| <input checked="" type="checkbox"/> Transmittal Letter                      | <input checked="" type="checkbox"/> Fee Transmittal Form |
| <input type="checkbox"/> Issue Fee Transmittal                              |  |
| <input type="checkbox"/> Letter to Official Draftsman                       |  |
| <input type="checkbox"/> Extension of Time                                  |  |

PT 22 Papers mailed to Commissioner of Patents and Trademarks